

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Make America Number 1

ADDRESS (number and street) ▼

2 ROOSEVELT AVENUE

☐ Check if different than previously reported. (ACC)

PORT JEFFERSON STA

NY

11776

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00575373

3. IS THIS REPORT

☐

NEW (N)

OR

☒

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☒ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer JACQUELYN JAMES

Signature of Treasurer

JACQUELYN JAMES

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Make America Number 1

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 02 / 01 / 2016

To:

 M M / D D / Y Y Y Y Y
 02 / 29 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016		7494987.69
(b) Cash on Hand at Beginning of Reporting Period.....	2745909.42	
(c) Total Receipts (from Line 19)	854564.95	870270.16
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	3600474.37	8365257.85
7. Total Disbursements (from Line 31)	3177912.09	7942695.57
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	422562.28	422562.28
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	35350.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Make America Number 1

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y Y
 02 / 01 / 2016

To:

 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

0.00

0.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

0.00

0.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

854564.95

870270.16

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

854564.95

870270.16

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

854564.95

870270.16

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	2933318.81	7462108.34
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	244593.28	480587.23
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3177912.09	7942695.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3177912.09	7942695.57

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 49
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Make America Number 1

Full Name (Last, First, Middle Initial)

A. BRUCE BENDER

Mailing Address 150 E. MONTECITO AVE #F

City	State	Zip Code
SIERRA MADRE	CA	91024

FEC ID number of contributing
federal political committee.

C

Name of Employer

RICBERAY

Occupation

PRES.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	17	/	2016

Transaction ID : SA17.5494

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. CHASE BANK

Mailing Address PO BOX 65974

City	State	Zip Code
SAN ANTONIO	TX	78265

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.16

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	29	/	2016

Transaction ID : SA17.5450

Amount of Each Receipt this Period

109.95

☐ Memo Item

INTEREST INCOME

Full Name (Last, First, Middle Initial)

C. HERZOG RAILROAD SERVICES INC.

Mailing Address 700 S. RIVERSIDE ROAD

City	State	Zip Code
ST. JOSEPH	MO	64507

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	26	/	2016

Transaction ID : SA17.5454

Amount of Each Receipt this Period

250000.00

☐ Memo Item

OTHER FEDERAL RECEIPT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

251109.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 49
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Make America Number 1

Full Name (Last, First, Middle Initial)

A. STEVE JOHNSON

Mailing Address 3099 S. THORNRIIDGE DR.

City State Zip Code
 SPRINGFIELD MO 65809

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 25 / 2016

Transaction ID : SA17.5543

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. J.M. JUNG

Mailing Address PO BOX 7060

City State Zip Code
 NOVI MI 48376

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 22 / 2016

Transaction ID : SA17.5451

Amount of Each Receipt this Period

100000.00

☐ Memo Item

OTHER FEDERAL RECEIPT

Full Name (Last, First, Middle Initial)

C. KAREN KIM

Mailing Address 1316 WILMINGTON ISLAND RD

City State Zip Code
 SAVANNAH GA 31410

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA17.5482

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 49
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Make America Number 1

Full Name (Last, First, Middle Initial)

A. CHARLEEN MCBRAYER

Mailing Address 5098 POST OAK TRITT RD. NE

City	State	Zip Code
ROSWELL	GA	30075

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	22	/	2016

Transaction ID : SA17.5503

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. DENNIS MCHENRY

Mailing Address 2109 SAINT CHARLES RD

City	State	Zip Code
NEW BETHLEHEM	PA	16242

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DAIRY FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	25	/	2016

Transaction ID : SA17.5533

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. ROBERT MERCER

Mailing Address 600 ROUTE 25A

City	State	Zip Code
EAST SETAUKET	NY	11733

FEC ID number of contributing
federal political committee.

C

Name of Employer

RENAISSANCE TECHNOLOGIES

Occupation

FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	26	/	2016

Transaction ID : SA17.5453

Amount of Each Receipt this Period

500000.00

☐ Memo Item

OTHER FEDERAL RECEIPT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

500750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Make America Number 1

Full Name (Last, First, Middle Initial)

A. WILLIAM REYNOLDS

Mailing Address 12500 S BUGAI RD

City
CEDARState
MIZip Code
49621FEC ID number of contributing
federal political committee.

C

Name of Employer
LEELANAU IND LLCOccupation
CNC MACHINIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	4				2	0	1	6

Transaction ID : SA17.5523

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.00

852859.95

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 49

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Make America Number 1

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address PO BOX 84314

City

BATON ROUGE

State

LA

Zip Code

70884

Purpose of Disbursement

CREDIT CARD MERCHANT FEES

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

Transaction ID : SB29.5566

Amount of Each Disbursement this Period

185.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BOSTON COACH

Mailing Address 245 SUMMER STREET

City

BOSTON

State

MA

Zip Code

02111

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2016

Transaction ID : SB29.5438

Amount of Each Disbursement this Period

360.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BRACEWELL & GIULIANI LLP

Mailing Address PO BOX 848566

City

DALLAS

State

TX

Zip Code

75284

Purpose of Disbursement

LEGAL & COMPLIANCE SERVICES

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2016

Transaction ID : SB29.5456

Amount of Each Disbursement this Period

49149.28

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

49695.53

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 49

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Make America Number 1

Full Name (Last, First, Middle Initial)

A. CAMPAIGN DATA SOLUTIONS

Mailing Address 7740 TINTED MESA CT.

City	State	Zip Code
LAS VEGAS	NM	89149

Purpose of Disbursement VOTER CONTACT SVCS - PUBLICATIONS/VOTER CANVASSING PRE-PAID	<input type="text"/>
Candidate Name	

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

Transaction ID : SB29.5573

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. COMPLIANCE CONSULTING LLC

Mailing Address PO BOX 365

City	State	Zip Code
MCLEAN	VA	22101

Purpose of Disbursement COMPLIANCE CONSULTING	<input type="text"/>
Candidate Name	

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2016

Transaction ID : SB29.5470

Amount of Each Disbursement this Period

12925.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SHAWN DIETZ

Mailing Address 720 CENTRAL AVENUE EAST

City	State	Zip Code
HAMPTON	IA	50441

Purpose of Disbursement VOTER CONTACT SERVICES/MILEAGE	<input type="text"/>
Candidate Name	

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2016

Transaction ID : SB29.5467

Amount of Each Disbursement this Period

4380.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

32305.00

--

	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

Make America Number 1

A. KRISTINA HERNANDEZ

Mailing Address 332 CRESTHAVEN PLACE

City	State	Zip Code
SIMPSONVILLE	SC	29681

Purpose of Disbursement

MEDIA CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB29.5465

Amount of Each Disbursement this Period

5000.00

 Memo Item

Full Name (Last, First, Middle Initial)

B. INSOURCECODE LLC

Mailing Address 8606 ALLISONVILLE ROAD
STE 260

City	State	Zip Code
INDIANAPOLIS	IN	46250

Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB29.5444

Amount of Each Disbursement this Period

499.00

Memo Item

Full Name (Last, First, Middle Initial)

C. JEFF KING

Mailing Address 508 CENTER ST

City	State	Zip Code
WALL LAKE	IA	51466

VOTER CONTACT SERVICES/MILEAGE

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Three digital displays are shown, each with a row of small squares above the main display area. The first display shows '02' with two squares above it. The second display shows '05' with two squares above it. The third display shows '2016' with four squares above it.

Transaction ID : SB29.5463

Amount of Each Disbursement this Period

5362.53

 Memo Item

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

10861.53

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 49

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Make America Number 1

Full Name (Last, First, Middle Initial)

A. ERIK LARSEN

Mailing Address 2210 NEBRASKA STREET

City	State	Zip Code
SIOUX CITY	IA	51104

Purpose of Disbursement
VOTER CONTACT SERVICES/MILEAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2016

Transaction ID : SB29.5462

Amount of Each Disbursement this Period

4265.14

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAIL CHIMPMailing Address 675 PONCE DE LEON AVE NE
STE 5000

City	State	Zip Code
ATLANTA	GA	30308

Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2016

Transaction ID : SB29.5445

Amount of Each Disbursement this Period

1100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TIM OVERLIN

Mailing Address 1440 41ST PLACE

City	State	Zip Code
DES MOINES	IA	50311

Purpose of Disbursement
VOTER CONTACT SERVICES/MILEAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2016

Transaction ID : SB29.5474

Amount of Each Disbursement this Period

3859.72

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

9224.86

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 49

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Make America Number 1

Full Name (Last, First, Middle Initial)

A. STEVE RIKER

Mailing Address 4600 215TH STREET

City
AMESState
IAZip Code
50014Purpose of Disbursement
VOTER CONTACT SERVICES/MILEAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2016

Transaction ID : SB29.5469

Amount of Each Disbursement this Period

4940.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ERIC ROSENTHAL

Mailing Address 3935 NANCY JANE LANE NE

City
CEDAR RAPIDSState
IAZip Code
52402Purpose of Disbursement
VOTER CONTACT SERVICES/MILEAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2016

Transaction ID : SB29.5460

Amount of Each Disbursement this Period

4529.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ERIC ROSENTHAL

Mailing Address 3935 NANCY JANE LANE NE

City
CEDAR RAPIDSState
IAZip Code
52402Purpose of Disbursement
VOTER CONTACT SERVICES/MILEAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2016

Transaction ID : SB29.5461

Amount of Each Disbursement this Period

7869.29

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17339.05

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Make America Number 1

Full Name (Last, First, Middle Initial)

A. JUDD SAUL

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2016

Mailing Address 1801 DONALD DRIVE

City	State	Zip Code
CEDAR FALLS	IA	50613

Transaction ID : SB29.5464Purpose of Disbursement
VOTER CONTACT SERVICES/MILEAGE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3414.60

☐ Memo Item

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Full Name (Last, First, Middle Initial)

B. CHAD STEENHOEK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2016

Mailing Address 3892 N. 500TH AVENUE

City	State	Zip Code
AMES	IA	50014

Transaction ID : SB29.5457Purpose of Disbursement
VOTER CONTACT SERVICES/MILEAGE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

4613.77

☐ Memo Item

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Full Name (Last, First, Middle Initial)

C. THE POLLING COMPANY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2016

Mailing Address 400 NORTH CAPITOL STREET NW
STE 790

City	State	Zip Code
WASHINGTON	DC	20001

Transaction ID : SB29.5471Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

20000.00

☐ Memo Item

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

28028.37

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 49

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Make America Number 1

Full Name (Last, First, Middle Initial)

A. THE POLLING COMPANYMailing Address 400 NORTH CAPITOL STREET NW
STE 790

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
SURVEY RESEARCH SVCS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2016

Transaction ID : SB29.5472

Amount of Each Disbursement this Period

91945.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE POLLING COMPANYMailing Address 400 NORTH CAPITOL STREET NW
STE 790

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
SURVEY RESEARCH SVCS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2016

Transaction ID : SB29.5473

Amount of Each Disbursement this Period

19724.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET STREET

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

Transaction ID : SB29.5448

Amount of Each Disbursement this Period

504.14

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

112173.64

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 49

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Make America Number 1

Full Name (Last, First, Middle Initial)

A. MELINDA WADSLEY

Mailing Address 1247 OLD BLOOMINGTON ROAD

City
AMESState
IAZip Code
50010Purpose of Disbursement
VOTER CONTACT SERVICES/MILEAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼
Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2016

Transaction ID : SB29.5466

Amount of Each Disbursement this Period

4847.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼
Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼
Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

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☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4847.34

264475.32

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 18 OF 49

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Make America Number 1

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

GLITTERING STEEL LLCNature of Debt (Purpose):
VIDEO PRODUCTIONMailing Address 8383 WILSHIRE BLVD
STE 1000City State Zip Code
BEVERLY HILLS CA 90211

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5748

Amount Incurred This Period

31350.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

31350.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

THE LUKENS COMPANYNature of Debt (Purpose):
DIRECT MAIL EXPENSEMailing Address 2800 SHIRLINGTON ROAD
9TH FLOORCity State Zip Code
ARLINGTON VA 22206

Outstanding Balance Beginning This Period

11067.04

Transaction ID : SD10.5201

Amount Incurred This Period

0.00

Payment This Period

11067.04

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

THE MONACO GROUPNature of Debt (Purpose):
DIRECT MAIL EXPENSE - DISPUTED

Mailing Address 1011 S. LINWOOD AVENUE

City State Zip Code
SANTA ANA CA 92705

Outstanding Balance Beginning This Period

4000.00

Transaction ID : SD10.5037

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

35350.00

2) **TOTALS** This Period (last page this line number only)..... ►

35350.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

35350.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 19 OF 49
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1		FEC IDENTIFICATION NUMBER ▼ C C00575373	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y			
Full Name of Payee CAMBRIDGE ANALYTICA LLC		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 8383 WILSHIRE BLVD STE 1000		Date of Public Distribution/Dissemination 02 / 20 / 2016	
City BEVERLY HILLS		State CA	
Zip Code 90211		Amount 78.00	
Purpose of Expenditure MEDIA		Category/Type 	
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate		District: 00 State: NV	
Calendar Year-To-Date Per Election for Office Sought 78020.89		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee CAMBRIDGE ANALYTICA LLC		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 8383 WILSHIRE BLVD STE 1000		Date of Public Distribution/Dissemination 02 / 20 / 2016	
City BEVERLY HILLS		State CA	
Zip Code 90211		Amount 743.00	
Purpose of Expenditure MEDIA		Category/Type 	
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate		District: 00 State: SC	
Calendar Year-To-Date Per Election for Office Sought 1340397.14		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶			
(c) TOTAL Independent Expenditures.....▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
JACQUELYN JAMES		[Electronically Filed]	
Signature		Date 06 / 30 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 20 OF 49
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1			FEC IDENTIFICATION NUMBER ▼ C C00575373	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee CAMBRIDGE ANALYTICA LLC			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 8383 WILSHIRE BLVD STE 1000			Date of Public Distribution/Dissemination 02 / 20 / 2016	
City BEVERLY HILLS		State CA	Zip Code 90211	Amount 6000.00
Purpose of Expenditure MEDIA		Category/Type 		Transaction ID : SE.5215 Date of Disbursement or Obligation 01 / 14 / 2016
Name of Federal Candidate MARCO RUBIO			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>SC</u>
Calendar Year-To-Date Per Election for Office Sought 1340397.14			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ 	
Full Name of Payee CAMBRIDGE ANALYTICA LLC			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 8383 WILSHIRE BLVD STE 1000			Date of Public Distribution/Dissemination 02 / 20 / 2016	
City BEVERLY HILLS		State CA	Zip Code 90211	Amount 10000.00
Purpose of Expenditure MEDIA		Category/Type 		Transaction ID : SE.5217 Date of Disbursement or Obligation 01 / 14 / 2016
Name of Federal Candidate MARCO RUBIO			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought 78020.89			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ 	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶			 	
(c) TOTAL Independent Expenditures.....▶			 	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature JACQUELYN JAMES			Date [Electronically Filed] 06 / 30 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 21 OF 49
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1		FEC IDENTIFICATION NUMBER ▼ C C00575373	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y			
Full Name of Payee CAMBRIDGE ANALYTICA LLC		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 8383 WILSHIRE BLVD STE 1000		Date of Public Distribution/Dissemination 02 / 20 / 2016	
City BEVERLY HILLS		State CA	Zip Code 90211
Purpose of Expenditure MEDIA		Category/ Type 	Amount 2052.00
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC
Calendar Year-To-Date Per Election for Office Sought 1340397.14		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee CAMBRIDGE ANALYTICA LLC		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 8383 WILSHIRE BLVD STE 1000		Date of Public Distribution/Dissemination 02 / 20 / 2016	
City BEVERLY HILLS		State CA	Zip Code 90211
Purpose of Expenditure MEDIA		Category/ Type 	Amount 1063.00
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 78020.89		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶			
(c) TOTAL Independent Expenditures.....▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature JACQUELYN JAMES		Date [Electronically Filed] 06 / 30 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 22 OF 49
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1		FEC IDENTIFICATION NUMBER ▼ C C00575373	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y			
Full Name of Payee CAMBRIDGE ANALYTICA LLC		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 8383 WILSHIRE BLVD STE 1000		Date of Public Distribution/Dissemination 02 / 20 / 2016	
City BEVERLY HILLS		State CA	
Zip Code 90211		Amount 207.00	
Purpose of Expenditure MEDIA		Category/Type 	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate		District: <u>00</u> State: <u>SC</u>	
Calendar Year-To-Date Per Election for Office Sought 1340397.14		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee CAMBRIDGE ANALYTICA LLC		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 8383 WILSHIRE BLVD STE 1000		Date of Public Distribution/Dissemination 02 / 20 / 2016	
City BEVERLY HILLS		State CA	
Zip Code 90211		Amount 378.00	
Purpose of Expenditure MEDIA		Category/Type 	
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate		District: <u>00</u> State: <u>SC</u>	
Calendar Year-To-Date Per Election for Office Sought 1340397.14		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature JACQUELYN JAMES		Date 06 / 30 / 2016	
		[Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 23 OF 49
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1		FEC IDENTIFICATION NUMBER ▼ C C00575373	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y			
Full Name of Payee CAMBRIDGE ANALYTICA LLC		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 8383 WILSHIRE BLVD STE 1000		Date of Public Distribution/Dissemination 02 / 20 / 2016	
City BEVERLY HILLS		State CA	Zip Code 90211
Purpose of Expenditure MEDIA		Category/ Type 	Amount 219.00
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought 78020.89		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee CAMBRIDGE ANALYTICA LLC		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 8383 WILSHIRE BLVD STE 1000		Date of Public Distribution/Dissemination 02 / 22 / 2016	
City BEVERLY HILLS		State CA	Zip Code 90211
Purpose of Expenditure MEDIA		Category/ Type 	Amount 3266.00
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought 78020.89		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature JACQUELYN JAMES		Date 06 / 30 / 2016 [Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 24 OF 49
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1	FEC IDENTIFICATION NUMBER ▼ C C00575373
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee CAMBRIDGE ANALYTICA LLC			<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 02 / 22 / 2016	
Mailing Address 8383 WILSHIRE BLVD STE 1000			Amount 1094.00		
City BEVERLY HILLS	State CA	Zip Code 90211	Transaction ID : SE.5238		
Purpose of Expenditure MEDIA		Category/ Type 	Date of Disbursement or Obligation 01 / 14 / 2016		
Name of Federal Candidate MARCO RUBIO			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate	District: <u>00</u> State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought 78020.89			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee CAMBRIDGE ANALYTICA LLC			<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 02 / 23 / 2016	
Mailing Address 8383 WILSHIRE BLVD STE 1000			Amount 1197.00		
City BEVERLY HILLS	State CA	Zip Code 90211	Transaction ID : SE.5246		
Purpose of Expenditure MEDIA		Category/ Type 	Date of Disbursement or Obligation 01 / 14 / 2016		
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate	District: <u>00</u> State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought 78020.89			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES

[Electronically Filed]

Signature

Date

06 / 30 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 25 OF 49
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1		FEC IDENTIFICATION NUMBER ▼ C C00575373	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name of Payee CAMBRIDGE ANALYTICA LLC <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 02 / 23 / 2016	
Mailing Address 8383 WILSHIRE BLVD STE 1000		Amount 954.00	
City BEVERLY HILLS	State CA	Zip Code 90211	Transaction ID : SE.5247
Purpose of Expenditure MEDIA	Category/Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 01 / 14 / 2016	
Name of Federal Candidate MARCO RUBIO <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 78020.89		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee CAMPAIGN DATA SOLUTIONS <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 02 / 13 / 2016	
Mailing Address 7740 TINTED MESA CT.		Amount 50000.00	
City LAS VEGAS	State NM	Zip Code 89149	Transaction ID : SE.5108
Purpose of Expenditure VOTER CONTACT SVCS - PUBLICATIONS/VOTER CANVASSING	Category/Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 02 / 12 / 2016	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 763151.63		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		50000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶			
(c) TOTAL Independent Expenditures.....▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature JACQUELYN JAMES		Date M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2016	
		[Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 26 OF 49
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00575373</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>					
Full Name of Payee CAMPAIGN DATA SOLUTIONS			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>		
Mailing Address 7740 TINTED MESA CT.			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>		
City State Zip Code LAS VEGAS NM 89149		Transaction ID : SE.5123 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>			
Purpose of Expenditure VOTER CONTACT SVCS - PUBLICATIONS/VOTER CANVASSING		Category/Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div>			
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 778151.63			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee CAMPAIGN DATA SOLUTIONS			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>		
Mailing Address 7740 TINTED MESA CT.			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>		
City State Zip Code LAS VEGAS NM 89149		Transaction ID : SE.5208 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>			
Purpose of Expenditure VOTER CONTACT SVCS - PUBLICATIONS/VOTER CANVASSING		Category/Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div>			
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 798151.63			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 35000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature JACQUELYN JAMES			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> 06 / 30 / 2016		
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 27 OF 49
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1		FEC IDENTIFICATION NUMBER ▼ C C00575373	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY			
Full Name of Payee CAMPAIGN DATA SOLUTIONS		<input type="checkbox"/> Memo Item	
Mailing Address 7740 TINTED MESA CT.		Date of Public Distribution/Dissemination 02 / 22 / 2016	
City LAS VEGAS	State NM	Zip Code 89149	Amount 35000.00
Purpose of Expenditure VOTER CONTACT SVCS - PUBLICATIONS/VOTER CANVASSING		Category/Type 	Transaction ID : SE.5229 Date of Disbursement or Obligation 02 / 22 / 2016
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought 833151.63		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee CAMPAIGN DATA SOLUTIONS		<input type="checkbox"/> Memo Item	
Mailing Address 7740 TINTED MESA CT.		Date of Public Distribution/Dissemination 02 / 22 / 2016	
City LAS VEGAS	State NM	Zip Code 89149	Amount 75202.99
Purpose of Expenditure VOTER CONTACT SVCS - PUBLICATIONS/VOTER CANVASSING		Category/Type 	Transaction ID : SE.5230 Date of Disbursement or Obligation 02 / 22 / 2016
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought 908354.62		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....		110202.99	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature JACQUELYN JAMES		Date 06 / 30 / 2016	
		[Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1		FEC IDENTIFICATION NUMBER ▼ C C00575373	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee GLITTERING STEEL LLC		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 31 / 2016	
Mailing Address 8383 WILSHIRE BLVD STE 1000				Amount 20250.00	
City BEVERLY HILLS	State CA	Zip Code 90211		Transaction ID : SE.5056	
Purpose of Expenditure VIDEO PRODUCTION		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 02 / 01 / 2016	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought		2236444.35		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee GLITTERING STEEL LLC		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 16 / 2016	
Mailing Address 8383 WILSHIRE BLVD STE 1000				Amount 10750.00	
City BEVERLY HILLS	State CA	Zip Code 90211		Transaction ID : SE.5116	
Purpose of Expenditure VIDEO PRODUCTION		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 02 / 16 / 2016	
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought		2593908.40		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	31000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES

[Electronically Filed]

Signature

Date

MM / DD / YYYY
06 / 30 / 2016

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 29 OF 49
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1			FEC IDENTIFICATION NUMBER ▼ C C00575373	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee GLITTERING STEEL LLC			<input type="checkbox"/> Memo Item	
Mailing Address 8383 WILSHIRE BLVD STE 1000			Date of Public Distribution/Dissemination 02 / 16 / 2016	
City BEVERLY HILLS		State CA	Zip Code 90211	Amount 5550.00
Purpose of Expenditure VIDEO PRODUCTION		Category/Type 		Transaction ID : SE.5117 Date of Disbursement or Obligation 02 / 16 / 2016
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>SC</u>
Calendar Year-To-Date Per Election for Office Sought 2599458.40			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee GLITTERING STEEL LLC			<input type="checkbox"/> Memo Item	
Mailing Address 8383 WILSHIRE BLVD STE 1000			Date of Public Distribution/Dissemination 02 / 16 / 2016	
City BEVERLY HILLS		State CA	Zip Code 90211	Amount 20250.00
Purpose of Expenditure VIDEO PRODUCTION		Category/Type 		Transaction ID : SE.5118 Date of Disbursement or Obligation 02 / 16 / 2016
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>SC</u>
Calendar Year-To-Date Per Election for Office Sought 2619708.40			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			25800.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶				
(c) TOTAL Independent Expenditures.....▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature JACQUELYN JAMES			Date [Electronically Filed] 06 / 30 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 30 OF 49
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00575373</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>					
Full Name of Payee GLITTERING STEEL LLC			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02 / 17 / 2016</div>		
Mailing Address 8383 WILSHIRE BLVD STE 1000			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">20250.00</div>		
City BEVERLY HILLS		State CA	Zip Code 90211		
Purpose of Expenditure VIDEO PRODUCTION		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 50px;"></div>		Transaction ID : SE.5183 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02 / 16 / 2016</div>	
Name of Federal Candidate MARCO RUBIO			<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>SC</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div> 2639958.40			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee GLITTERING STEEL LLC			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02 / 28 / 2016</div>		
Mailing Address 8383 WILSHIRE BLVD STE 1000			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">6243.75</div>		
City BEVERLY HILLS		State CA	Zip Code 90211		
Purpose of Expenditure VIDEO PRODUCTION		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 50px;"></div>		Transaction ID : SE.5399 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02 / 23 / 2016</div>	
Name of Federal Candidate MARCO RUBIO			<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OK</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div> 50797.75			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">26493.75</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <div style="text-align: center;">JACQUELYN JAMES</div>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">06 / 30 / 2016</div>		
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 31 OF 49
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1		FEC IDENTIFICATION NUMBER ▼ C C00575373	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee GLITTERING STEEL LLC		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 28 / 2016	
Mailing Address 8383 WILSHIRE BLVD STE 1000				Amount 12506.25	
City BEVERLY HILLS	State CA	Zip Code 90211		Transaction ID : SE.5400	
Purpose of Expenditure VIDEO PRODUCTION		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 02 / 23 / 2016	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: OK	
Calendar Year-To-Date Per Election for Office Sought		63304.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee GLITTERING STEEL LLC		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 26 / 2016	
Mailing Address 8383 WILSHIRE BLVD STE 1000				Amount 31350.00	
City BEVERLY HILLS	State CA	Zip Code 90211		Transaction ID : SE.5791	
Purpose of Expenditure VIDEO PRODUCTION		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 03 / 17 / 2016	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: OK	
Calendar Year-To-Date Per Election for Office Sought		308004.90		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	12506.25
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES

[Electronically Filed]

Date

MM / DD / YYYY
06 / 30 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00575373 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; text-align: right;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item RIGEL STRATEGIES LLC		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="text-align: center;"> <div style="border: 1px solid black; padding: 2px;">02</div> / <div style="border: 1px solid black; padding: 2px;">07</div> / <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 3948 LEGACY DRIVE STE 106-282		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">186181.20</div>	
City PLANO	State TX	Zip Code 75023	Transaction ID : SE.5086 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="text-align: center;"> <div style="border: 1px solid black; padding: 2px;">02</div> / <div style="border: 1px solid black; padding: 2px;">05</div> / <div style="border: 1px solid black; padding: 2px;">2016</div> </div>
Purpose of Expenditure MEDIA		Category/Type <div style="border: 1px solid black; padding: 2px;"></div>	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">2190702.60</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item RIGEL STRATEGIES LLC		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="text-align: center;"> <div style="border: 1px solid black; padding: 2px;">02</div> / <div style="border: 1px solid black; padding: 2px;">07</div> / <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 3948 LEGACY DRIVE STE 106-282		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">186181.20</div>	
City PLANO	State TX	Zip Code 75023	Transaction ID : SE.5087 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="text-align: center;"> <div style="border: 1px solid black; padding: 2px;">02</div> / <div style="border: 1px solid black; padding: 2px;">05</div> / <div style="border: 1px solid black; padding: 2px;">2016</div> </div>
Purpose of Expenditure MEDIA		Category/Type <div style="border: 1px solid black; padding: 2px;"></div>	
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">2376883.80</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">372362.40</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 33 OF 49
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1	FEC IDENTIFICATION NUMBER ▼ C C00575373
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee RIGEL STRATEGIES LLC		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 07 / 2016	
Mailing Address 3948 LEGACY DRIVE STE 106-282				Amount 93090.60	
City PLANO	State TX	Zip Code 75023		Transaction ID : SE.5088	
Purpose of Expenditure MEDIA		Category/Type 		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 05 / 2016	
Name of Federal Candidate DONALD J TRUMP		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>SC</u>	
Calendar Year-To-Date Per Election for Office Sought		2469974.40		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee RIGEL STRATEGIES LLC		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 13 / 2016	
Mailing Address 3948 LEGACY DRIVE STE 106-282				Amount 573243.74	
City PLANO	State TX	Zip Code 75023		Transaction ID : SE.5105	
Purpose of Expenditure MEDIA		Category/Type 		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 10 / 2016	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought		669135.63		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	666334.34
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1			FEC IDENTIFICATION NUMBER ▼ C C00575373		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee RIGEL STRATEGIES LLC			Date of Public Distribution/Dissemination 02 / 26 / 2016		
Mailing Address 3948 LEGACY DRIVE STE 106-282			Amount 18056.18		
City PLANO		State TX	Zip Code 75023		Transaction ID : SE.5374
Purpose of Expenditure MEDIA		Category/Type 		Date of Disbursement or Obligation 02 / 25 / 2016	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AL</u>		
Calendar Year-To-Date Per Election for Office Sought 18056.18			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ 		
Full Name of Payee RIGEL STRATEGIES LLC			Date of Public Distribution/Dissemination 02 / 26 / 2016		
Mailing Address 3948 LEGACY DRIVE STE 106-282			Amount 7738.36		
City PLANO		State TX	Zip Code 75023		Transaction ID : SE.5375
Purpose of Expenditure MEDIA		Category/Type 		Date of Disbursement or Obligation 02 / 25 / 2016	
Name of Federal Candidate MARCO RUBIO			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AL</u>		
Calendar Year-To-Date Per Election for Office Sought 25794.54			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ 		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			25794.54		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			 		
(c) TOTAL Independent Expenditures..... ▶			 		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>JACQUELYN JAMES</u> <div style="text-align: right;">[Electronically Filed]</div>			Date 06 / 30 / 2016		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 35 OF 49
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1		FEC IDENTIFICATION NUMBER ▼ C C00575373	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY	
Full Name of Payee RIGEL STRATEGIES LLC		<input type="checkbox"/> Memo Item	
Mailing Address 3948 LEGACY DRIVE STE 106-282		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 26 / 2016	
City PLANO		State TX	
Zip Code 75023		Amount 11601.86	
Purpose of Expenditure MEDIA		Category/Type	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee RIGEL STRATEGIES LLC		<input type="checkbox"/> Memo Item	
Mailing Address 3948 LEGACY DRIVE STE 106-282		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 26 / 2016	
City PLANO		State TX	
Zip Code 75023		Amount 4972.22	
Purpose of Expenditure MEDIA		Category/Type	
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		16574.08	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
JACQUELYN JAMES		[Electronically Filed]	
Signature		Date MM / DD / YYYY 06 / 30 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1		FEC IDENTIFICATION NUMBER ▼ C C00575373	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee RIGEL STRATEGIES LLC		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 26 / 2016	
Mailing Address 3948 LEGACY DRIVE STE 106-282				Amount 12952.73	
City PLANO	State TX	Zip Code 75023		Transaction ID : SE.5378	
Purpose of Expenditure MEDIA		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 02 / 25 / 2016	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OK</u>	
Calendar Year-To-Date Per Election for Office Sought		76256.73		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee RIGEL STRATEGIES LLC		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 26 / 2016	
Mailing Address 3948 LEGACY DRIVE STE 106-282				Amount 5551.17	
City PLANO	State TX	Zip Code 75023		Transaction ID : SE.5379	
Purpose of Expenditure MEDIA		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 02 / 25 / 2016	
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OK</u>	
Calendar Year-To-Date Per Election for Office Sought		81807.90		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	18503.90
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES

[Electronically Filed]

Date

MM / DD / YYYY
06 / 30 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 37 OF 49
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00575373 </div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY					
Full Name of Payee RIGEL STRATEGIES LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 02 / 26 / 2016 </div>		
Mailing Address 3948 LEGACY DRIVE STE 106-282			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 27870.91 </div>		
City PLANO		State TX	Zip Code 75023		Transaction ID : SE.5380
Purpose of Expenditure MEDIA		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 02 / 25 / 2016 </div>	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TN</u>
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 72424.91 </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee RIGEL STRATEGIES LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 02 / 26 / 2016 </div>		
Mailing Address 3948 LEGACY DRIVE STE 106-282			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 11944.67 </div>		
City PLANO		State TX	Zip Code 75023		Transaction ID : SE.5381
Purpose of Expenditure MEDIA		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 02 / 25 / 2016 </div>	
Name of Federal Candidate MARCO RUBIO			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TN</u>
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 84369.58 </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 39815.58 </div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature JACQUELYN JAMES			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 06 / 30 / 2016 </div>		[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 38 OF 49
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1	FEC IDENTIFICATION NUMBER ▼ C C00575373
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee RIGEL STRATEGIES LLC		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination 02 / 26 / 2016	
Mailing Address 3948 LEGACY DRIVE STE 106-282				Amount 105337.25	
City PLANO	State TX	Zip Code 75023	Transaction ID : SE.5382		
Purpose of Expenditure MEDIA		Category/Type 	Date of Disbursement or Obligation 02 / 25 / 2016		
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>		
Calendar Year-To-Date Per Election for Office Sought 105337.25		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

Full Name of Payee RIGEL STRATEGIES LLC		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination 02 / 26 / 2016	
Mailing Address 3948 LEGACY DRIVE STE 106-282				Amount 45144.53	
City PLANO	State TX	Zip Code 75023	Transaction ID : SE.5383		
Purpose of Expenditure MEDIA		Category/Type 	Date of Disbursement or Obligation 02 / 25 / 2016		
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>		
Calendar Year-To-Date Per Election for Office Sought 150481.78		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	150481.78
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES

[Electronically Filed]

Date

06 / 30 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 39 OF 49
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1	FEC IDENTIFICATION NUMBER ▼ C C00575373																								
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; margin-left:10px"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td></td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin-left:10px"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td></td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin-left:10px"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>		M	M					D	D					Y	Y	Y	Y	Y	Y						
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Full Name of Payee RIGEL STRATEGIES LLC		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <table border="1" style="display:inline-table"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>02</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>26</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> 2016		M	M		02			D	D		26			Y	Y	Y	Y	Y	Y												
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City PLANO	State TX	Zip Code 75023																																	
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Full Name of Payee RIGEL STRATEGIES LLC		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <table border="1" style="display:inline-table"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>02</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>26</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> 2016		M	M		02			D	D		26			Y	Y	Y	Y	Y	Y												
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Mailing Address 3948 LEGACY DRIVE STE 106-282				Amount <table border="1" style="display:inline-table"> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td>33785.01</td></tr> </table>													33785.01																		
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City PLANO	State TX	Zip Code 75023																																	
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Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: VA																																
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="display:inline-table"> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td>112616.70</td></tr> </table>												112616.70	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶																				
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(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<table border="1" style="display:inline-table"> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td>112616.70</td></tr> </table>												112616.70
					112616.70								
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<table border="1" style="display:inline-table"> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>												
(c) TOTAL Independent Expenditures.....▶	<table border="1" style="display:inline-table"> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>												

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES

[Electronically Filed]

Date

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30		

 /

Y	Y	Y	Y	Y	Y

 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 40 OF 49
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1		FEC IDENTIFICATION NUMBER ▼ C C00575373	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name of Payee RIGEL STRATEGIES LLC		<input type="checkbox"/> Memo Item	
Mailing Address 3948 LEGACY DRIVE STE 106-282		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 02 / 26 / 2016	
City PLANO		State TX	
Zip Code 75023		Amount 135670.50	
Purpose of Expenditure MEDIA		Category/Type	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		180224.50	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate		District: 00 State: GA	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify) ▶	
Full Name of Payee RIGEL STRATEGIES LLC		<input type="checkbox"/> Memo Item	
Mailing Address 3948 LEGACY DRIVE STE 106-282		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 02 / 26 / 2016	
City PLANO		State TX	
Zip Code 75023		Amount 58144.50	
Purpose of Expenditure MEDIA		Category/Type	
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		238369.00	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate		District: 00 State: GA	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		193815.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
JACQUELYN JAMES		[Electronically Filed]	
Signature		Date M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 41 OF 49
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1			FEC IDENTIFICATION NUMBER ▼ C C00575373		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					

Full Name of Payee RIGEL STRATEGIES LLC			<input type="checkbox"/> Memo Item		
Mailing Address 3948 LEGACY DRIVE STE 106-282			Date of Public Distribution/Dissemination 02 / 26 / 2016		
City PLANO		State TX	Zip Code 75023		
Purpose of Expenditure MEDIA		Category/Type 		Amount 112571.55	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 138366.09			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AL</u>		
			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee RIGEL STRATEGIES LLC			<input type="checkbox"/> Memo Item		
Mailing Address 3948 LEGACY DRIVE STE 106-282			Date of Public Distribution/Dissemination 02 / 26 / 2016		
City PLANO		State TX	Zip Code 75023		
Purpose of Expenditure MEDIA		Category/Type 		Amount 48244.95	
Name of Federal Candidate MARCO RUBIO			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 186611.04			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AL</u>		
			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	160816.50
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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JACQUELYN JAMES

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Signature _____ Date 06 / 30 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 42 OF 49
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1			FEC IDENTIFICATION NUMBER ▼ C C00575373		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y Y Y</div>					
Full Name of Payee RIGEL STRATEGIES LLC			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">26</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2016</div>		
Mailing Address 3948 LEGACY DRIVE STE 106-282			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">173196.45</div>		
City PLANO		State TX	Zip Code 75023		Transaction ID : SE.5358
Purpose of Expenditure MEDIA		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">26</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2016</div>	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TN</u>		
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">257566.03</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee RIGEL STRATEGIES LLC			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">26</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2016</div>		
Mailing Address 3948 LEGACY DRIVE STE 106-282			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">74227.05</div>		
City PLANO		State TX	Zip Code 75023		Transaction ID : SE.5359
Purpose of Expenditure MEDIA		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">26</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2016</div>	
Name of Federal Candidate MARCO RUBIO			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TN</u>		
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">331793.08</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">247423.50</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
(c) TOTAL Independent Expenditures.....▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>JACQUELYN JAMES</u> <div style="text-align: right;">[Electronically Filed]</div>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">06</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">30</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2016</div>		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 43 OF 49
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00575373</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>					
Full Name of Payee RIGEL STRATEGIES LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">02</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">26</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">2016</div>		
Mailing Address 3948 LEGACY DRIVE STE 106-282			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">118480.95</div>		
City PLANO		State TX	Zip Code 75023		Transaction ID : SE.5360
Purpose of Expenditure MEDIA		Category/ Type <div style="border: 1px solid black; width: 60px; height: 20px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">02</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">26</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">2016</div>	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AR</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">135055.03</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee RIGEL STRATEGIES LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">02</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">26</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">2016</div>		
Mailing Address 3948 LEGACY DRIVE STE 106-282			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">50777.55</div>		
City PLANO		State TX	Zip Code 75023		Transaction ID : SE.5361
Purpose of Expenditure MEDIA		Category/ Type <div style="border: 1px solid black; width: 60px; height: 20px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">02</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">26</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">2016</div>	
Name of Federal Candidate MARCO RUBIO			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AR</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">185832.58</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶					<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">169258.50</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"></div>
(c) TOTAL Independent Expenditures..... ▶					<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"></div>
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JACQUELYN JAMES			[Electronically Filed]		Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">06</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">30</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">2016</div>
Signature _____					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 44 OF 49
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00575373</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>					
Full Name of Payee RIGEL STRATEGIES LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02 / 26 / 2016</div>		
Mailing Address 3948 LEGACY DRIVE STE 106-282			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">153527.85</div>		
City PLANO		State TX	Zip Code 75023		Transaction ID : SE.5362
Purpose of Expenditure MEDIA		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02 / 26 / 2016</div>	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: OK
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">235335.75</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee RIGEL STRATEGIES LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02 / 26 / 2016</div>		
Mailing Address 3948 LEGACY DRIVE STE 106-282			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">65797.65</div>		
City PLANO		State TX	Zip Code 75023		Transaction ID : SE.5363
Purpose of Expenditure MEDIA		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02 / 26 / 2016</div>	
Name of Federal Candidate MARCO RUBIO			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: OK
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">301133.40</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶					<div style="border: 1px solid black; padding: 2px; display: inline-block;">219325.50</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶					<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature JACQUELYN JAMES			[Electronically Filed]		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">06 / 30 / 2016</div>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1		FEC IDENTIFICATION NUMBER ▼ C C00575373	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee RIGEL STRATEGIES LLC		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 29 / 2016	
Mailing Address 3948 LEGACY DRIVE STE 106-282				Amount 2061.45	
City PLANO	State TX	Zip Code 75023		Transaction ID : SE.5401	
Purpose of Expenditure MEDIA		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 02 / 29 / 2016	
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: OK	
Calendar Year-To-Date Per Election for Office Sought		303194.85		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee RIGEL STRATEGIES LLC		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 29 / 2016	
Mailing Address 3948 LEGACY DRIVE STE 106-282				Amount 14804.10	
City PLANO	State TX	Zip Code 75023		Transaction ID : SE.5402	
Purpose of Expenditure MEDIA		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 02 / 29 / 2016	
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: AR	
Calendar Year-To-Date Per Election for Office Sought		200636.68		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	16865.55
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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JACQUELYN JAMES

[Electronically Filed]

Signature

Date

MM / DD / YYYY
06 / 30 / 2016

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 46 OF 49
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1		FEC IDENTIFICATION NUMBER ▼ C C00575373	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY			
Full Name of Payee RIGEL STRATEGIES LLC		<input type="checkbox"/> Memo Item	
Mailing Address 3948 LEGACY DRIVE STE 106-282		Date of Public Distribution/Dissemination 02 / 29 / 2016	
City PLANO	State TX	Zip Code 75023	Amount 10732.50
Purpose of Expenditure MEDIA	Category/ Type 	Transaction ID : SE.5403 Date of Disbursement or Obligation 02 / 29 / 2016	
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>GA</u>
Calendar Year-To-Date Per Election for Office Sought 249101.50		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee RIGEL STRATEGIES LLC		<input type="checkbox"/> Memo Item	
Mailing Address 3948 LEGACY DRIVE STE 106-282		Date of Public Distribution/Dissemination 02 / 29 / 2016	
City PLANO	State TX	Zip Code 75023	Amount 4810.05
Purpose of Expenditure MEDIA	Category/ Type 	Transaction ID : SE.5404 Date of Disbursement or Obligation 02 / 29 / 2016	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OK</u>
Calendar Year-To-Date Per Election for Office Sought 308004.90		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		15542.55	
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶			
(c) TOTAL Independent Expenditures.....▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
JACQUELYN JAMES		[Electronically Filed]	
Signature		Date 06 / 30 / 2016	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 47 OF 49
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1		FEC IDENTIFICATION NUMBER ▼ C C00575373	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name of Payee RIGEL STRATEGIES LLC		<input type="checkbox"/> Memo Item	
Mailing Address 3948 LEGACY DRIVE STE 106-282		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 02 / 29 / 2016	
City PLANO		State TX	
Zip Code 75023		Amount 34542.90	
Purpose of Expenditure MEDIA		Category/Type	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		235179.58	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate		District: 00 State: AR	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify) ▶	
Full Name of Payee RIGEL STRATEGIES LLC		<input type="checkbox"/> Memo Item	
Mailing Address 3948 LEGACY DRIVE STE 106-282		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 02 / 29 / 2016	
City PLANO		State TX	
Zip Code 75023		Amount 25042.50	
Purpose of Expenditure MEDIA		Category/Type	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		274144.00	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate		District: 00 State: GA	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....		59585.40	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
JACQUELYN JAMES		[Electronically Filed]	
Signature		Date M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2016	

NAME OF COMMITTEE (In Full) Make America Number 1	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00575373 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y</div>	

Full Name of Payee THE LUKENS COMPANY		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>02 / 13 / 2016</div> </div>	
Mailing Address 2800 SHIRLINGTON ROAD 9TH FLOOR			Amount <div> <div>Amount</div> <div>113184.00</div> </div>	
City ARLINGTON	State VA	Zip Code 22206	Transaction ID : SE.5111 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>02 / 11 / 2016</div> </div>	
Purpose of Expenditure DIRECT MAIL EXPENSE		Category/ Type		
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> President	<input type="checkbox"/> House <input type="checkbox"/> Senate District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought <div> <div>Amount</div> <div>2583158.40</div> </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee THE LUKENS COMPANY		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 13 / 2016	
Mailing Address 2800 SHIRLINGTON ROAD 9TH FLOOR			Amount 32948.96	
City ARLINGTON	State VA	Zip Code 22206	Transaction ID : SE.5112 Date of Disbursement or Obligation MM / DD / YYYY 02 / 11 / 2016	
Purpose of Expenditure DIRECT MAIL EXPENSE		Category/ Type		
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President District: 00 State: NV	
Calendar Year-To-Date Per Election for Office Sought		702084.59		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	146132.96
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES

[Electronically Filed]

Date _____

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Make America Number 1			FEC IDENTIFICATION NUMBER ▼ C C00575373		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>					
Full Name of Payee THE LUKENS COMPANY			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 13 / 2016		
Mailing Address 2800 SHIRLINGTON ROAD 9TH FLOOR			Amount 11067.04		
City ARLINGTON		State VA	Zip Code 22206		Transaction ID : SE.5582
Purpose of Expenditure DIRECT MAIL EXPENSE		Category/Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 11 / 2016	
Name of Federal Candidate MARCO RUBIO			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: <u>00</u> State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 713151.63			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee			Date of Public Distribution/Dissemination		
Mailing Address			Amount		
City		State	Zip Code		Date of Disbursement or Obligation
Purpose of Expenditure		Category/Type		M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			11067.04		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			2933318.81		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature JACQUELYN JAMES			Date 06 / 30 / 2016 <i>[Electronically Filed]</i>		